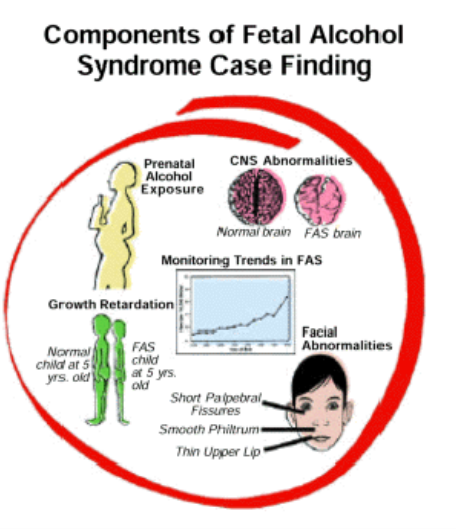
Monitoring Fetal Alcohol Syndrome

Children with fetal alcohol syndrome (FAS) can have serious lifelong disabilities, including mental retardation, learning disabilities, and behavioral problems. However, FAS is completely preventable - if a woman does not drink alcohol while she is pregnant. Surveillance of FAS is important to document the magnitude of the problem and to monitor trends in the occurrence of this preventable birth defect.

- FAS is a disorder characterized by growth retardation, facial abnormalities, and central nervous system dysfunction. FAS is caused by a woman's use of alcohol during pregnancy.

- The exact prevalence of FAS is not known. CDC studies have documented FAS prevalence rates ranging from 2 to 15 cases per 10,000 live births in the United States. Even less is known about the prevalence of FAS in other countries.

- It is very important for affected children and their families that FAS is diagnosed early and that children get the help they need as soon as possible. However, FAS is difficult to diagnose and is usually not recognized in newborns.



CDC is conducting monitoring of FAS in six U.S. states and in South Africa.

- CDC funds five projects that are implementing comprehensive FAS programs in six states (Colorado, Michigan, Minnesota, Missouri and South Dakota/North Dakota). The programs are designed to: (1) develop, implement, and evaluate state-wide and targeted programs for FAS prevention, including the identification of high-prevalence areas or selected subpopulations of childbearing-aged women at high risk for an alcohol-exposed pregnancy; (2) establish or enhance prenatal prevention programs to serve these populations; and (3) establish or use existing systems for monitoring the impact of prevention programs.

CDC supports an ongoing FAS surveillance program in South Africa to assess the magnitude of FAS in two areas located in two Northern Cape Province Communities. Because of the high prevalence of FAS in these areas, the project has also initiated efforts to prevent alcohol-exposed pregnancies among women of childbearing age and to link children with FAS to appropriate health services.